

**HONOLULU ETHICS COMMISSION**

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.govWebsite: <http://www.honolulu.gov/ethics/>

THIS SPACE FOR OFFICE USE ONLY

HONOLULU
ETHICS COMMISSION
RECEIVED

'19 JAN 22 P4:32

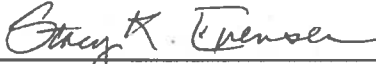

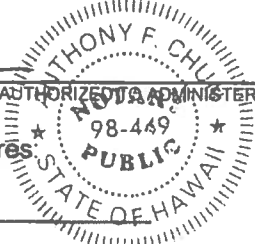
2019 REGISTRATIONLobbyist Registration
(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Evensen, Stacy		
LOBBYIST FIRM/EMPLOYER (if applicable) BT Consulting, Inc		TELEPHONE 808-524-4155
MAILING ADDRESS (No. and Street or P.O. Box) 1000 Bishop St., Ste 808		FAX
		EMAIL stacyevensen@gmail.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Hawaiian Humane Society		TELEPHONE 808-356-2200
MAILING ADDRESS (No. and Street or P.O. Box) 2700 Waialae Avenue		FAX
		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96826
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
<input checked="" type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE June 1, 2018

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY		
<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input checked="" type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below): _____		

PART IV LOBBYIST CERTIFICATION	
<i>I hereby certify that the foregoing statements are true and correct.</i>  LOBBYIST SIGNATURE DEC 4 2018 DATE	Subscribed and sworn to before me This <u>4th</u> day of <u>December</u> , <u>2018</u> By:  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Anthony F. Chun My commission expires <u>SEP - 7 2022</u> 

PART V AUTHORIZATION TO LOBBY		
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
NAME OF ORGANIZATION (if applicable)		TELEPHONE
MAILING ADDRESS (No. and Street or P.O. Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>		
_____ (Signature of Authorizing Officer or Person Represented)		_____ (Date)



Doc Date: DEC 4 2018 Pages: 2
Name: Anthony F. Chun First Circuit
Doc. Description: 2019 Registration
Anthony F. Chun DEC 4 2018
Signature Date
NOTARY CERTIFICATION